

WISCONSIN DEPARTMENT OF HEALTH AND FAMILY SERVICES
Division of Health Care Financing
Bureau of Eligibility Management
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TO: Medicaid Eligibility Handbook Users

FROM: James Jones, Director
Bureau of Eligibility Management

RE: Medicaid Eligibility Handbook Release 05-07

DATE: December 28, 2005

The changes noted in this cover sheet are incorporated into the online handbook. Changes in the MEH are indicated with yellow highlighted text. Anytime you access the online MEH, it will reflect current policy. To be notified of MEH releases by email, go to <http://dhfs.wisconsin.gov/em/policy-notification/signup.htm>, enter your email address and check the "Medicaid" box in the "notification listing" section.

EFFECTIVE DATE

Release and effective dates are at the bottom of each web page within the MEH.

The following changes are included in this release:

CHANGES

- 1.2.3.1 A section was added on what to do if it is suspected that a client's SSN is being used fraudulently.
- 2.1.4 Clarification was provided that if an 18 year old is applying for MA on his/her own the case should be processed separately. If parents are applying for MA with the 18 year old then process on same application.
- 2.2.4 Operations Memo 05-40 "Elimination of the Grace Month" was incorporated into the MEH.
- 3.3.4.2 Clarification was provided in the Failure to Cooperate section of Medical Support Liability.

New Text :

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Note: If the local CS agency determines that a parent is not co-operating because court ordered lying in expenses are not paid, ES should not sanction that parent.

4.1.2.33 Operation Memo 05-24 "Treatment of Military and Combat Pay for Medicaid and FoodShare" was incorporated in the MEH.

4.1.3.2 Costs associated with real property listed for sale was added to special exempt income.

4.1.4.4 A sentence and a link were removed. This sentence was inadvertently retained in the MEH when Ops Memo 05-31 "Change in Dividend and Interest Exclusion for EBD MA" was incorporated into the MEH in release 05-05.

Stricken Text

~~Only interest earned on the funds in a retirement fund should be counted as income according to [\(4.1.4.9\)](#).~~

4.9.3 Clarification was made in the deductible period section that individuals who have been certified for Medicaid after meeting a deductible, will have to complete a review to establish a new deductible period.

OLD Text

~~Individuals who have been certified for Medicaid after meeting a deductible, will automatically have a new deductible period established. The new deductible period begins the first day of the first month after the previous Medicaid deductible certification ended. Similarly, Medicaid recipients, who do not meet a deductible within a deductible period automatically have a new deductible period established beginning the first day of the first month after their original deductible period ended. CARES does not send a review notice to the client regarding the new deductible period if s/he did not meet the deductible for the current period.~~

New Text

Individuals who have been certified for Medicaid after meeting a deductible, will have to complete a review to establish a new deductible period. CARES does not send a review notice to the client regarding the new deductible period if s/he did not meet the deductible for the current period.

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- 5.8.11 Rogers Memorial Hospital and Aurora Psychiatric Hospital (formerly Milwaukee Psychiatric Hospital) were added to IMD's located in Milwaukee County. These facilities were inadvertently deleted with the 05-02 release of the MEH.
- 5.9.9.2.4 New Text was added to clarify how to treat Medicare part D premiums paid by community waivers recipients.
- NEW TEXT**
- Include all health and dental insurance premiums covering the waiver person and for which s/he is responsible and pays **a premium. This includes any Medicare Premium obligation including Medicare Part D.** See [6.3.4](#) for a list of insurance types for which premium deductions are not allowed.
- 5.10.4, 5.10.6, 5.11.7
8.1.5 Operations Memo 05-49 "2006 Cost of Living Adjustment (COLA)" was incorporated into the MEH.
- 5.10.4 Clarification and examples were provided in the asset transfer section of Spousal Impoverishment.
- 6.2.1 Operations Memo 05-39 "Expanded Medicaid Benefit Recovery" was incorporated into the MEH.
- 6.2.2.2.3.2 A section was added on how to calculate overpayments for QMB cases.
- 7.1.2 SSI Medicaid was added to the list of Full Benefit MA.

Minor Changes

- 2.1.6.2 Change reports should be provide at application, review, and anytime a change is reported.

New Text

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Provide each client with a Change Report (HCF 10137) when s/he applies, **at review**, and at any time s/he reports a change. It is not mandatory that the (HCF 10137) be used in reporting changes.

3.6.6 A link was added to the MA Disability Redetermination Report. (HCF 10114).

4.1.4.9.2.2 #8 Clarification was provided in the section on Interest and Dividends Income not excluded for EBD.

New Text

Count interest and dividend payments from a **revocable or** irrevocable trust as non-exempt unearned income, only when the trustee makes an actual payment of the interest or dividend to the trust beneficiary.

4.2.5.2.1 Clarification was provided that EBD cases must deduct depreciation from self employment income.

Old Text:

EBD ~~person~~ must deduct depreciation from their self employment income.

New Text:

EBD **cases** must deduct depreciation from their self employment income.

5.4.6.7 Numbering was corrected.

Old Text:

Give the \$30 and 1/3 income disregard to each person in the group who has earned income and who meets the conditions of "a" and "b", or "a" and "c" below.

New Text:

Give the \$30 and 1/3 income disregard to each person in the group who has earned income and who meets the conditions of "1" and "2", or "1" and "3" below.

5.11.8.1 Dates in an example #2 were corrected.

8.1.2 A typo was corrected in the life estate table for 61 year olds.